

IAP12 Rec'd PCT/PTO 19 MAY 2006

APPLICATION DATA SHEET

Application Information

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?: Paper

Computer Readable Form (CRF)? No

Number of copies of CRF::

Title :: OCULAR TISSUE MODIFICATION

Attorney Docket Number:: 900158.401USPC

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets:: 9

Small Entity?: Yes

Petition included?: No

Petition Type::

Licensed U.S. Gov't Agency::

Contract or Grant No::

Secrecy Order in Parent Appl.?: No

First Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Australia
Status::	Full Capacity
Given Name::	Claire
Middle Name::	F.
Family Name::	Jessup
Name Suffix::	
City of Residence::	Mitchell Park
State or Province of Residence::	
Country of Residence::	Australia
Street of mailing address::	2/6 Mary Street
City of mailing address::	Mitchell Park
State or Province of mailing address::	
Country of mailing address::	Australia
Postal or Zip Code of mailing address::	5043

Second Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Australia
Status::	Full Capacity
Given Name::	Helen
Middle Name::	M.
Family Name::	Brereton
Name Suffix::	
City of Residence::	Bellevue Heights
State or Province of Residence::	
Country of Residence::	Australia
Street of mailing address::	47 Glenwood Drive
City of mailing address::	Bellevue Heights

State or Province of mailing address::
Country of mailing address:: Australia
Postal or Zip Code of mailing address:: 5050

Third Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Australia
Status:: Full Capacity
Given Name:: Douglas
Middle Name:: J.
Family Name:: Coster
Name Suffix::
City of Residence:: Heathpool
State or Province of Residence::
Country of Residence:: Australia
Street of mailing address:: 3 Newcastle Street
City of mailing address:: Heathpool
State or Province of mailing address::
Country of mailing address:: Australia
Postal or Zip Code of mailing address:: 5068

Fourth Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Australia
Status:: Full Capacity
Given Name:: Keryn
Middle Name:: A.
Family Name:: Williams
Name Suffix::

City of Residence:: Kingswood
 State or Province of Residence::
 Country of Residence:: Australia
 Street of mailing address:: 17 East Parade
 City of mailing address:: Kingswood
 State or Province of mailing address::
 Country of mailing address:: Australia
 Postal or Zip Code of mailing address:: 5062

Correspondence Information

Correspondence Customer Number :: **00500**

Representative Information

Representative Customer Number::		00500
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Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/AU2004/001606	11/19/04

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
Australia	2003906440	11/21/03	Yes

Assignee Information

Assignee name::	The Flinders University of South Australia
Street of mailing address::	Sturt Road
City of mailing address::	Bedford Park
State or Province of mailing address::	South Australia
Country of mailing address::	Australia
Postal or Zip Code of mailing address::	5042

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